STATEMENT OF

FORM 1	ORGANIZATION (See instructions)			Office use only	
1. NAME OF COMMITTEE (in	iull) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5		
Life and Marri	age PAC				
ADDRESS (number and s	PO Box 1327				
(Check if address is changed)	Alexandria				
		CITY▲	STATE▲	ZIP CODE 📥	
COMMITTEE'S E-MAI (Check if address is changed)	L ADDRESS (Please provide only one e	,			
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
(Check if address is changed)					
2. DATE 0.4	/ D D / Y Y Y Y Y D D D D D D D D D D D				
3. FEC IDENTIFICA	TION NUMBER	C C00438531			
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)			
I certify that I have exami	ned this Statement and to the best of my kn	owledge and belief it is true, corre	ct and complete		
Signature of Treasurer	Electronically Filed by Steve Ta	ylor	Date 04	/ 04 / Y Y Y Y Y Y	
NOTE: Submission of fal	se, erroneous, or incomplete information m.	ay subject the person signing this	·	es of 2 U.S.C. §437g.	
Office Use Only		For further informat Federal Election Com Toll Free 800-424-95	nmission	FEC FORM 1 (Revised 02/2009)	